

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Mary's Political Action Committee

ADDRESS (number and street)

7315 Wisconsin Avenue

Suite 310 East

☐Check if different  
than previously  
reported. (ACC)

Bethesda

MD

20814

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00365338

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2011

through

03

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kevin McGuire

Signature of Treasurer

Electronically Filed by Kevin McGuire

Date

04

20

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Mary's Political Action Committee

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	20337.21
(b) Cash on Hand at Beginning of Reporting Period .....	12037.64	
(c) Total Receipts (from Line 19) .....	29165.87	30167.92
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	41203.51	50505.13
7. Total Disbursements (from Line 31) .....	3116.29	12417.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38087.22	38087.22
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Mary's Political Action Committee

Report Covering the Period:

From:

M M  
0 3D D  
0 1Y Y Y Y  
2 0 1 1

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1500.00	1500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1500.00	1500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1500.00	2500.00
12. Transfers From Affiliated/Other Party Committees .....	27665.02	27665.02
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.85	2.90
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	29165.87	30167.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	29165.87	30167.92

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	3116.29	12417.91	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	3116.29	12417.91	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3116.29	12417.91	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3116.29	12417.91	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	1500.00	2500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1500.00	2500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3116.29	12417.91
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3116.29	12417.91

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 12

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Katherine M. Cullen

Mailing Address 226 7th Street NE  
Suite 2City State Zip Code  
Washington DC 20002FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SC Partners, LLCOccupation  
Co-Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Transaction ID: SA11AI.4751

Amount of Each Receipt this Period

750.00

**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

SC Partners, LLC

Mailing Address 226 7th Street NE  
Suite 2City State Zip Code  
Washington DC 20002FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Transaction ID: SA11AI.4745

Amount of Each Receipt this Period

1500.00

SEE MEMO ITEMS/ Verified  
Non-Corporate**C.**

Full Name (Last, First, Middle Initial)

Charlie Shipp

Mailing Address 226 7th Street NE  
Suite 2City State Zip Code  
Washington DC 20002FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SC Partners, LLCOccupation  
Co-Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Transaction ID: SA11AI.4748

Amount of Each Receipt this Period

750.00

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael Bozick

Mailing Address 77330 Medicine Bow Circle

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Richard Bagdasarian, Inc.

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA12.4772

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Anne W. Marion

Mailing Address 801 Cherry Street  
Unit 9

City

Fort Worth

State

TX

Zip Code

76102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA12.4767

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Mary Bono Mack Victory Fund

Mailing Address 228 South Washington Street  
Suite 115

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00472027

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27665.02

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA12.4764

Amount of Each Receipt this Period

27665.02

Transfer of Net Proceeds

**SUBTOTAL** of Receipts This Page (optional) .....

27665.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 12

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gregory Renker

Mailing Address 47220 West Eldorado Drive

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Guthy Renker, LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA12.4765

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Stacey Renker

Mailing Address 47220 West Eldorado Drive

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA12.4766

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Mary Sue Shannon

Mailing Address 2323 North Mayfair Road  
Unit 220

City

Milwaukee

State

WI

Zip Code

53226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA12.4770

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 12

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael S. Shannon

Mailing Address 2323 North Mayfair Road  
Unit 220

City	State	Zip Code
Milwaukee	WI	53226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KSL Capital PartnersOccupation  
Resort Manager

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: SA12.4771

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

27665.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Arthur J. Finkelstein &amp; Associates

Mailing Address 16 North Astor Street

City  
IrvingtonState  
NYZip Code  
10533Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4759

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Bankcard Center

Mailing Address PO Box 569200

City  
DallasState  
TXZip Code  
75356Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4754

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	1	1

Amount of Each Disbursement this Period

570.29

**C.**

Full Name (Last, First, Middle Initial)

Campaign Financial Services

Mailing Address 7315 Wisconsin Avenue  
Suite 310 EastCity  
BethesdaState  
MDZip Code  
20814Purpose of Disbursement  
PAC Compliance Consulting

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4743

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	1	1

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

3070.29

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Frontier Airlines

Mailing Address 7001 Tower Road

City State Zip Code  
Denver CO 80249

Purpose of Disbursement

PAC Airline Fee

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4757

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 66423

City State Zip Code  
Chicago IL 60666

Purpose of Disbursement

PAC Airfare

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4755

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

461.80

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 66423

City State Zip Code  
Chicago IL 60666

Purpose of Disbursement

PAC Airline Fee

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4756

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mary's Political Action Committee

A.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 66423

City  
Chicago

State  
IL

Zip Code  
60666

Purpose of Disbursement  
PAC Meal Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4758

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2011

Amount of Each Disbursement this Period

8.49

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

3070.29